

TOWNSEND and TOWNSEND and CREW LLP

Two Embarcadero Center, 8<sup>th</sup> Floor  
 San Francisco, California 94111-3834  
 (415) 576-0200

In re application of: Rubin et al.

Application No.: 09/010,377

Filed: January 21, 1998

Group Art Unit: 1644

For: TREATMENT OF VIRAL ENCEPHALITIS BY AGENTS  
 BLOCKING ALPHA-VLA-4 INTEGRIN FUNCTION

THE ASSISTANT COMMISSIONER FOR PATENTS  
 Washington, D.C. 20231

Attorney Docket No. 15270-504300US

Corres. and Via:

BOX AF

Date: January 02, 2001

I hereby certify that this is being deposited with the United States  
 Postal Service as first class mail in an envelope addressed to:

Assistant Commissioner for Patents  
 Washington, D.C. 20231

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TECH CENTER 1600/2900

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Enclosed is a petition to extend time to respond.  
☒ Declaration of Stephen B. Freedman under 37 CFR § 1.132.  
☒ Twelve attachments  
☒ Notice of Appeal

The filing fee has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA
TOTAL	* 17	MINUS	** 20	=	0
INDEP.	* 1	MINUS	*** 3	=	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					

## SMALL ENTITY

RATE	ADDIT. FEE
x \$9.00 =	
x \$40.00 =	
+ \$135.00 =	
TOTAL ADDIT. FEE	

OTHER THAN  
SMALL ENTITY

OR

RATE	ADDIT. FEE
x \$18.00 =	\$0.00
x \$80.00 =	\$0.00
+ \$270.00 =	
TOTAL	\$0.00

OR

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, then write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☒ No fee is due.

Please charge Deposit Account No. 20-1430 as follows:

☐ Claims fee \$ \_\_\_\_\_  
☒ Any additional fees associated with this paper or during the pendency of this application.

NO extra copies of this sheet are enclosed.

Customer No. 20350

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